



NASSAU COUNTY DEPARTMENT OF ASSESSMENT  
240 OLD COUNTRY ROAD, 4<sup>TH</sup> FLOOR  
MINEOLA, NY 11501  
ATTN: ASIE COMPLIANCE

ASIE-2005  
SELF-STORAGE  
ANNUAL SURVEY  
OF INCOME AND  
EXPENSE

PROPERTY IDENTIFICATION

LIST ONLY THE PRIMARY SECTION, BLOCK & LOT

SECTION

BLOCK

LOT

1

2

3

YOU MAY CONSOLIDATE YOUR FILING FOR CONTIGUOUS  
PROPERTIES THAT ARE COMMONLY OWNED AND OPERATED

CHECK IF RELEVANT ☐ ALL LOTS ARE CONTIGUOUS  
☐ ADDITIONAL LOTS ARE LISTED ON AN ATTACHED SHEET  
☐ ALL LOTS ARE OPERATED AS AN ECONOMIC UNIT

DOES THIS SUBMISSION INCLUDE MORE THAN ONE TAX LOT?

CHECK YES ☐ OR NO ☐

IF YES, INDICATE THE NUMBER OF TAX LOTS \_\_\_\_\_  
AND LIST THEM BELOW ↓

SECTION

BLOCK

LOT

SECTION

BLOCK

LOT

SECTION

BLOCK

LOT

SECTION

BLOCK

LOT

SECTION

BLOCK

LOT

SECTION

BLOCK

LOT

CONTACT INFORMATION

OWNER OR OPERATOR'S NAME ☐ OWNER ☐ OPERATOR

ORGANIZATION

CONTACT PERSON

CONTACT PERSON'S RELATIONSHIP TO PROPERTY

CONTACT'S DAYTIME TELEPHONE

E-MAIL ADDRESS

PROPERTY DESCRIPTION AND USE

TOTAL NUMBER  
OF UNITS

TOTAL NUMBER OF  
BUILDINGS

NUMBER OF STORIES  
MAIN BUILDING

TOTAL GROSS  
AREA ALL BLDGS

LOT SIZE  
OR ACREAGE

10

11

12

13




14

LIST ALL OTHER TENANTS BY NAME AND PREDOMINANT USE. FILERS MAY ATTACH A COMPUTERIZED LISTING OR RENT ROLL.

15



PARKING			
16	DOES THIS SUBMISSION INCLUDE PARKING YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, LIST BELOW		
	OUTDOOR PARKING		INDOOR PARKING
17	TOTAL NUMBER OF SPACES		TOTAL NUMBER OF SPACES
	NUMBER OF PAID SPACES (IF ANY)		NUMBER OF PAID SPACES (IF ANY)
	MONTHLY RATE	\$	MONTHLY RATE
	IS PARKING SHARED BY OTHER PROPERTIES? YES <input type="checkbox"/> IF YES, LIST THEM HERE -		

PROPERTY LEASE INFORMATION	
IS THE PROPERTY LEASED BETWEEN RELATED PARTIES? THIS INCLUDES PARTIES THAT ARE RELATED THROUGH BLOOD OR MARRIAGE AND BUSINESS ENTITIES UNDER COMMON CONTROL.  YES <input type="checkbox"/> NO <input type="checkbox"/>	IS THIS PROPERTY SUBJECT TO A NET LEASE? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, CHECK APPROPRIATE BOX BELOW
<input type="checkbox"/> NET LEASE - A LEASE REQUIRING THE TENANT TO PAY, IN ADDITION TO A FIXED RENTAL, MANY OF THE EXPENSES FOR THE OPERATION OF THE PROPERTY - INDICATE THE NET LEASE AMOUNT IN THE SPACE PROVIDED HERE \$  AND IN THE APPROPRIATE SECTIONS ON THE INCOME & EXPENSE FORM. IN ADDITION, YOU MUST REPORT ANY EXPENSES YOU ARE RESPONSIBLE FOR IN THE APPROPRIATE SECTIONS OF THE DEPARTMENT STORE / SHOPPING CENTER INCOME & EXPENSE FORMS.	
<input type="checkbox"/> TRIPLE NET LEASE - A LEASE WHICH OBLIGATES THE TENANT TO PAY ALL OF THE EXPENSES OF THE LEASED PROPERTY, SUCH AS TAXES, INSURANCE, MAINTENANCE, UTILITIES, ETC. INDICATE THE TRIPLE NET LEASE AMOUNT IN THE SPACE PROVIDED HERE  \$ AND IN THE APPROPRIATE SPACE ON THE INCOME AND EXPENSE FORM. PLEASE REFER TO THE INCOME AND EXPENSE FORM ATTACHED FOR FURTHER INSTRUCTIONS FOR TENANTS AND OPERATORS.	
<input type="checkbox"/> GROUND LEASE - A LEASE OF VACANT LAND, OR LAND EXCLUSIVE OF THE BUILDING(S) ON IT. INDICATE THE GROUND RENT IN THE SPACE PROVIDE HERE  \$ AND IN THE APPROPRIATE SPACE ON THE INCOME AND EXPENSE FORM. PLEASE REFER TO THE INCOME AND EXPENSE FORM ATTACHED FOR FURTHER INSTRUCTIONS FOR TENANTS AND OPERATORS.	

SALES INFORMATION (within last 5 years)	
19	WAS THE PROPERTY ACQUIRED IN AN ARMS-LENGTH TRANSACTION WITHIN THE LAST 5 YEARS? YES <input type="checkbox"/> NO <input type="checkbox"/>  AN ARM'S LENGTH TRANSACTION - IS A LEGAL TERM MEANING THAT THERE EXISTED NO SPECIAL RELATIONSHIP BETWEEN THE PARTIES INVOLVED IN ANY MANNER WHICH WOULD TAINT THE RESULT.
	MONTH AND YEAR OF SALE PURCHASE PRICE \$

MAJOR CAPITAL IMPROVEMENTS (within last 5 years)			
20	A CAPITAL IMPROVEMENT IS A PHYSICAL ALTERATION, RENOVATION, REHABILITATION, REMODELING, CONVERSION, ADDITION OR EXTENSION MADE TO THE REAL PROPERTY WHICH HAS AN EXPECTED LIFE OF GREATER THAN 5 YEARS.		
	IMPROVEMENTS	DATE	COST / LIFE

ATTACHMENTS AND CERTIFICATION		
I certify, under penalty of perjury, that the information contained within this form and the attached Income and Expense Statement is accurate and truthful.		
SIGNATURE	NAME(PRINT)	DATE



PROPERTY NAME		SECTION		BLOCK		LOT		ASIE-2005 SELF-STORAGE INCOME			
SELF-STORAGE MINI-STORAGE OPERATING INCOME		TOTAL NUMBER OF UNITS / SPACES				GROSS AREA		GROSS RECEIPTS			
								2004		2005	
STORAGE SPACE RENTAL											
OUTDOOR STORAGE								\$		\$	
GARAGE STORAGE								\$		\$	
SALES								\$		\$	
EQUIPMENT RENTAL								\$		\$	
TRUCK RENTAL								\$		\$	
OTHER*						IS THIS INCOME RELATED TO SELF-STORAGE? YES <input type="checkbox"/> NO <input type="checkbox"/> DETAIL IN NOTES BELOW		\$		\$	
TOTAL MINI-STORAGE								\$		\$	
<div> <div>→</div> <div>           PROVIDE AN ITEMIZATION OF THE SELF-STORAGE UNITS IN THIS AREA OR ATTACH A COMPUTERIZED FACSIMILE         </div> </div>		UNIT SIZES			MONTHLY RENT			# OF UNITS			
			X			\$					
			X			\$					
			X			\$					
			X			\$					
			X			\$					
			X			\$					
			X			\$					
			X			\$					
			X			\$					
			X			\$					
			X			\$					
NOTES -											
DOES THE OWNER / MANAGER LIVE ON SITE? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, INDICATE TOTAL SQUARE FOOT LIVING AREA											
DOES ANY PERSONNEL LIVE ON SITE? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, INDICATE TOTAL SQUARE FOOT LIVING AREA											



<b>EXPENSES</b>		ASIE-2005 SELF-STORAGE EXPENSE
<b>OPERATING EXPENSES</b>		
	2004	2005
MANAGEMENT PAYROLL		
PAYROLL		
FUEL		
ELECTRICITY		
WATER & SEWER		
PROPERTY INSURANCE		
PERSONAL INSURANCE		
MANAGEMENT (Excluding Management Payroll)		
COMMON AREA MAINTENANCE (Excluding taxes and interest)		
REPAIRS AND MAINTENANCE TO REAL PROPERTY		
COST OF GOODS SOLD		
MAINTENANCE OF EQUIPMENT		
LEGAL		
EQUIPMENT LEASES		
LEASING COMMISSION		
BUSINESS TAX		
REAL ESTATE TAXES PAID BY LESSEE		
OFFICE EXPENSE		
MISCELLANEOUS CHARGES		
<b>TOTAL EXPENSES</b>	\$	\$
OTHER EXPENSES:		
<b>TOTAL EXPENSE</b>	\$	\$
<b>LEASE INFORMATION</b>		
DOES THE FILER OR A RELATED PERSON PAY RENT PURSUANT TO AN ARMS-LENGTH LEASE? YES <input type="checkbox"/> NO <input type="checkbox"/>		
DOES THE LESSOR RECEIVE PERCENTAGE RENT? YES <input type="checkbox"/> NO <input type="checkbox"/>		
IF YES, PERCENTAGE RENT: _____ % OF ADJUSTED ANNUAL SALES OVER \$ _____		
DOES THE LESSOR PAY ANY OF THE REAL ESTATE TAXES? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, SPECIFY -		
DOES THE LESSOR PROVIDE UTILITIES OR SERVICES? YES <input type="checkbox"/> NO <input type="checkbox"/>		
LIST UTILITIES AND SERVICES PROVIDED BY LANDLORD -		
HAVE ANY IMPROVEMENTS BEEN MADE BY LESSEE? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, DETAIL-		

